FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

		Office Use Only
1. NAME OF USE FEC MAI OR TYPE OR		
Clarke for Congress		
ADDRESS (number and street) 11136 200	Oth Street	
Check if different than previously reported. (ACC)		NY 11412
2. FEC IDENTIFICATION NUMBER \(\psi\)	CITY 🛕	STATE A ZIP CODE A
C00415331	3. IS THIS NEW (N) OI	R X AMENDED (A) NY 111
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)	(b) 12-Day PRE-Election Report for the Primary (12P) Convention (12C) Election on 1 1 0 (c) 30-Day POST-Election Report for General (30G) Election on	X General (12G) Runoff (12R) Special (12S) 7 2 0 0 6 in the State of
5. Covering Period 1 0 0 1	2 0 0 6 through	10 18 2006
I certify that I have examined this Report and to the Type or Print Name of Treasurer Ray L	e best of my knowledge and belief it is true, o Trotman	correct and complete.
Signature of Treasurer Electronically Filed by	Ray L Trotman	Date 0 7 0 6 2 0 0 7
NOTE : Submission of false, erroneous, or incomp	olete information may subject the person sign	
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